## ACT Instructional Support Workshop

District Name	
District Address	
(1) Please list the first name as the prir	nary contact for the district
Name	
Title or position:	
Email	Telephone:
(2) Name	
Title or position:	
Email	
(3) Name	
Title or position:	
Email	
(4) Name	
Title or position:	
Email	
(5) Name	
Title or position:	
Email	
Please select one of the following dates a	nd sites:
February 12 – Austin Peay State	University, Clarksville
February 13 – Tennessee Techno	ological University, Cookeville
February 17 – University of Tenno	essee – Martin, Martin
February 18 – Beaver Elementary	/ School Gym, Henderson County
February 19 – Ag EXPO Park, W	illiamson County
February 24 – Lee University, Cle	eveland
February 25 – Roane State Comr	munity College, Harriman
February 26 – Walters State Com	nmunity College, Morristown
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## Three easy ways to register:

**Fax:** 404-231-5945 Email: neeco.mills@act.org